



Debtor 1 Todd Meagher Case number (if known) \_\_\_\_\_

<b>3</b>	<b>HEB Grocery Company, LP</b> <b>646 S. Flores St.</b> <b>San Antonio, TX 78204</b>	<b>What is the nature of the claim?</b>  <b>Claim for attorneys' fees in litigation pending under Cause No. 4:17-cv-02810 in District Court, Southern District of Texas</b>	<b>\$ \$0.00</b>
<b>As of the date you file, the claim is:</b> Check all that apply			
<input checked="" type="checkbox"/> Contingent			
<input checked="" type="checkbox"/> Unliquidated			
<input checked="" type="checkbox"/> Disputed			
<input type="checkbox"/> None of the above apply			
<b>Does the creditor have a lien on your property?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____			
Value of security: - \$ _____			
Unsecured claim \$ _____			

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

<b>4</b>	<b>Karen Tripp</b> <b>P.O. Box 1301</b> <b>Houston, TX 77251</b>	<b>What is the nature of the claim?</b>  <b>Legal services</b>	<b>\$ \$0.00</b>
<b>As of the date you file, the claim is:</b> Check all that apply			
<input type="checkbox"/> Contingent			
<input checked="" type="checkbox"/> Unliquidated			
<input type="checkbox"/> Disputed			
<input type="checkbox"/> None of the above apply			
<b>Does the creditor have a lien on your property?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____			
Value of security: - \$ _____			
Unsecured claim \$ _____			

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

<b>5</b>	<b>Not Just Patents LLC</b> <b>c/o Wendy Peterson</b> <b>1248 Victoria St. N.</b> <b>Saint Paul, MN 55117</b>	<b>What is the nature of the claim?</b>  <b>Legal services</b>	<b>\$ \$0.00</b>
<b>As of the date you file, the claim is:</b> Check all that apply			
<input type="checkbox"/> Contingent			
<input checked="" type="checkbox"/> Unliquidated			
<input type="checkbox"/> Disputed			
<input type="checkbox"/> None of the above apply			
<b>Does the creditor have a lien on your property?</b>			
<input checked="" type="checkbox"/> No			
<input type="checkbox"/> Yes. Total claim (secured and unsecured) \$ _____			
Value of security: - \$ _____			
Unsecured claim \$ _____			

Contact \_\_\_\_\_

Contact phone \_\_\_\_\_

<b>6</b>	<b>Thompson Coe Cousins &amp; Irons LLP</b>	<b>What is the nature of the claim?</b>	<b>\$ \$119,056.90</b>
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**One Riverway  
Suite 1400  
Houston, TX 77056**

**As of the date you file, the claim is:** Check all that apply

- ☐ Contingent  
☐ Unliquidated  
☐ Disputed  
☒ None of the above apply

\_\_\_\_\_

**Does the creditor have a lien on your property?**

- ☒ No  
☐ Yes. Total claim (secured and unsecured) \$ \_\_\_\_\_  
Value of security: - \$ \_\_\_\_\_  
Unsecured claim \$ \_\_\_\_\_

\_\_\_\_\_ Contact

\_\_\_\_\_ Contact phone

**Part 2: Sign Below**

**Under penalty of perjury, I declare that the information provided in this form is true and correct.**

X /s/ Todd Meagher  
**Todd Meagher**  
Signature of Debtor 1

X \_\_\_\_\_  
Signature of Debtor 2

Date January 15, 2020

Date \_\_\_\_\_